

United States Bankruptcy Court Northern District of Illinois						Voluntary Petition																					
Name of Debtor (if individual, enter Last, First, Middle): KING, DEBORAH ANITA				Name of Joint Debtor (Spouse) (Last, First, Middle):																							
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): None				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																							
Last four digits of Soc.Sec.No./Complete EIN or other Tax ID No. (if more than one, state all): 8165				Last four digits of Soc.Sec.No./Complete EIN or other Tax ID No. (if more than one, state all):																							
Street Address of Debtor (No. & Street, City, and State) 2720 S. HIGHLAND AVE 334 LOMBARD, IL				Street Address of Joint Debtor (No. & Street, City, and State)																							
ZIPCODE 60148				ZIPCODE																							
County of Residence or of the Principal Place of Business: Du Page				County of Residence or of the Principal Place of Business:																							
Mailing Address of Debtor (if different from street address):				Mailing Address of Joint Debtor (if different from street address):																							
ZIPCODE				ZIPCODE																							
Location of Principal Assets of Business Debtor (if different from street address above): <div style="display: flex; justify-content: space-between;"><div>Attorney: Steven A. Leahy, The Law Office of Steven A Leahy 150 North Michigan Avenue Suite 1100 Chicago, Illinois 60601 ph: (312) 664-6649</div><div style="border: 1px solid black; padding: 2px; text-align: center;">ZIPCODE</div></div>																											
Type of Debtor (Form of Organization) (Check one box) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (if debtor is not one of the above entities, check this box and provide the information requested below) State type of entity: _____		Nature of Business (Check all applicable boxes) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Nonprofit Organization qualified under 15 U.S.C. § 501(c)(3)		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <div style="display: flex; justify-content: space-between;"><div><input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9</div><div><input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12</div><div><input checked="" type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Proceeding</div></div>																							
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to individuals only). Must attach signed application for the court's consideration. See Official Form 3B.		Nature of Debts (Check one box) <input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business				Chapter 11 Debtors: (Check any applicable box) <input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor is not a small business as defined in 11 U.S.C. § 101(51D) <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2 million																					
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.						THIS SPACE IS FOR COURT USE ONLY																					
Estimated Number of Creditors <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"><tr><td>1-49</td><td>50-99</td><td>100-199</td><td>200-999</td><td>1000-5000</td><td>5,001-10,000</td><td>10,001-25,000</td><td>25,001-50,000</td><td>50,001-100,000</td><td>OVER 100,000</td></tr><tr><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>								1-49	50-99	100-199	200-999	1000-5000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Estimated Assets <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"><tr><td>\$0 to \$50,000</td><td>\$50,001 to \$100,000</td><td>\$100,001 to \$500,000</td><td>\$500,001 to \$1 million</td><td>\$1,000,001 to \$10 million</td><td>\$10,000,001 to \$50 million</td><td>\$50,000,001 to \$100 million</td><td>More than \$100 million</td></tr><tr><td><input type="checkbox"/></td><td><input checked="" type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>						\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
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Voluntary Petition

(This page must be completed and filed in every case)

Document

Page 2 of 5

Name of Debtor(s):

DEBORAH ANITA KING

Prior Bankruptcy Case Filed Within Last 8 Years (If more than one, attach additional sheet)

Location

Where Filed:

NORTHERN DISTRICT OF ILLINOIS

Case Number:

03-17032

Date Filed:

4/17/03

Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor:

NONE

Case Number:

Date Filed:

District:

Relationship:

Judge:

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)

☐ Exhibit A is attached and made a part of this petition.

Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code.

X /s/ Steven A. Leahy 11/04/05
Signature of Attorney for Debtor(s) Date

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No

**Certification Concerning Debt Counseling
by Individual/Joint Debtor(s)**

☒ I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition.

☐ I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances. (Must attach certification describing.)

Information Regarding the Debtor (Check the Applicable Boxes)

Venue (Check any applicable box)

☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.

☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

☐ Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Statement by a Debtor Who Resides as a Tenant of Residential Property

Check all applicable boxes

☐ Landlord has a judgment for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord or lessor that obtained judgment)

(Address of landlord or lessor)

☐ Debtor claims that under applicable non bankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

☐ Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

DEBORAH ANITA KING

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by § 342(b) of the Bankruptcy Code.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ DEBORAH ANITA KING

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

11/04/05

Date

Signature of a Foreign Representative of a Recognized Foreign Proceedings

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign main proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.

☐

Pursuant to § 1511 of title 11 United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

(Date)

Signature of Attorney

X /s/ Steven A. Leahy

Signature of Attorney for Debtor(s)

STEVEN A. LEAHY

Printed Name of Attorney for Debtor(s)

The Law Office of Steven A Leahy

Firm Name

150 North Michigan Avenue

Address

Suite 1100 Chicago, Illinois 60601

(312) 664-6649

Telephone Number

11/04/05

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110(c).)

Address

X

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

AMERICASH INSTALLMENT LOAN
8414 W GRAND AVE
RIVER GROVE, IL 60171

AMERICASH LOANS
8414 W GRAND AVE
RIVER GROVE AVE, IL 60171

BANK ONE/CHASE
PO BOX 260180
BATON ROUGE, LA 70826

CAPITAL ONE
P O BOX 790216
ST LOUIS, MO 60148

CAPITAL ONE
PO BOX 790216
ST LOUIS, MO 63179

CARSON PIRIE SCOTT
PO BOX 17633
BALTIMORE, MD 21297

CERTEGY PAYMENT RECOVERY SERVICES, INC
11601 ROOSEVELT BOULEVARD
ST. PETERSBURG, FL 33716

CHECK N GO
3219 W 115TH ST
MERRIONETTE PARK, IL 60803

COTTONWOOD FINANCIAL
1901 GATEWAY DR
SUITE 200
IRVING, TX 75038

CROSS COUNTRY BANK
PO BOX 17120
WILMINGTON, DE 19886-7120

FINANCIAL RECOVERY SERVICES
PO BOX 385908
MINNEAPOLIS, MN 55438-1328

HSBC
PO BOX 17548
BALTIMORE, MD 21297-1548

HSBC
PO BOX 17548
BALTIMORE, MD 21297-1548

HSBC CARD SERVICES
PO BOX 17051
BALTIMORE, MD 21297

ILLINOIS TITLE
11915 SOUTH PULASKI
ALSIP, IL 60803

INSTANT CASH ADVANCE
1205 E SIBLEY BLVD
DOLTON, IL 60419

SHORT TERM LOANS
1400 E TOUHY AVE #108
DES PLAINES, IL 60018

THE CASH STORE
266 E. ROOSEVELT RD
LOMBARD, IL 60148

WINDOW MAGIC PLUS
5413 W.30TH PLACE
CICERO, IL 60804